GREG PENCE 6TH DISTRICT, INDIANA

ENERGY AND
COMMERCE COMMITTEE
SUBCOMMITTEE ON ENERGY
SUBCOMMITTEE ON CONSUMER
PROTECTION AND COMMERCE



COLUMBUS OFFICE: 529 WASHINGTON STREET COLUMBUS, IN 47201

## Congress of the United States

House of Representatives Washington, DC 20515-1406

## PRIVACY RELEASE FORM

Authorization in Accordance with the 1974 Privacy Act

## \*\*\*Request for Assistance with Expedited Passport Processing\*\*\*

Applicant's Full Name:	
$\Box$ First-time application $\Box$ Ren	ewal application Date Current Passport Expires:
Passport Locator/Application #:	
Date of Travel:	Date Passport was applied for:
Traveling to (City, Country):	Method of Travel □ Air □ Sea □ Land
<b>Document</b> (s) applied for: $\Box$ Passpo	rt book 🛘 Passport Card (NOT valid for international air travel)
Did you pay for expedited processing?	Yes   No Wait time quoted:
_ •	Emergency (immediate family member has died or is seriously ill or d and you need to travel outside the United States within 72 hours)
Date of Birth:	Social Security #:
Home Address:	City: State: IN ZIP:
Primary/Daytime Phone:	Phone Type: ☐ Cell ☐ Home ☐ Business
Alternate Phone:	Phone Type: ☐ Cell ☐ Home ☐ Business
Email Address:	Sign up for Updates/Newsletter: □Yes □ No
Summary of request	
Please attach any relevant supp	emental information, scans, receipts, etcdo not send originals.
INDIVIDUALS WITHOUT THE EXPRESS WRITTEN P.	NMENT FROM REVEALING ANY INFORMATION FROM THE PERSONAL FILES OF ERMISSION OF THE PERSON INVOLVED, DISCLOSURE OF PERSONAL RECORDS TO A LF OF THE CONSTITUENT IS PROHIBITED UNLESS THE INDIVIDUAL TO WHOM THE
	eby authorize the Office of U.S. Representative Greg Pence nation in my file pertinent to all inquiries on my behalf.
SIGNATURE:	DATE: